



tesa 687-WCG
6713-St-ar

Recant

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS : Dieter Wenninger, Stefan Rober, Wolfgang David,....
SERIAL NO. : 09/750,984
FILED : 12/28/2000
FOR : Adhesive tape for detecting unauthorized broaching
of a package

GROUP ART UNIT : 1772
EXAMINER :

Hon. Commissioner of Patents
and Trademarks
Washington, D.C. 20231

July 26, 2001

REQUEST FOR CORRECTED FILING RECEIPT

SIR:

The filing receipt in the above-identified application was found to contain the following errors:

The fourth inventor's place of residence should read:

ITZEHOE, GERMANY

Please issue a corrected filing receipt at your earliest convenience.

Respectfully submitted,

NORRIS McLAUGHLIN & MARCUS

By 

William C. Gerstenzang
Reg. No. 27,552

WCG/hg

220 East 42nd Street 30Fl
New York, NY 10017
(212) 808-0700

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TECHNICAL UNIT



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov

Bib Data Sheet

CONFIRMATION NO. 9463

SERIAL NUMBER 09/750,984	FILING DATE 12/28/2000 RULE	CLASS 428	GROUP ART UNIT 1771	ATTORNEY DOCKET NO. BEIERSDORF 687-WCG
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APPLICANTS

Dieter Wenninger, Hamburg, GERMANY;
Stefan Rober, Hamburg, GERMANY;
Wolfgang David, Itzehoe, GERMANY;
Ralf Schliephacke, Itzehoe, GERMANY;

** CONTINUING DATA *****

FILE COPY

** FOREIGN APPLICATIONS *****

GERMANY 199 63 711.3 12/29/1999

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/15/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GERMANY	SHEETS DRAWING 1	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

Norris McLaughlin & Marcus, P.A.
220 East 42nd Street
30th Floor
Tarrytown, NY 10017

TITLE

Adhesive tape for detecting unauthorized broaching of a package

FILING FEE RECEIVED 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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